UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	JAN 3 2038 Be 1 of 3 7
Name: Lauren Boebert	Daytime Telephone:	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
U.S. House of Representatives District 3 C O	Check If	U
STATUS  New Officer or Employee Staff Fill  Employing Office: Shared	Staff Filer Type (If Applicable): Shered Principal Assistant to XC. 31, 70,8	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child:     a. Qwn any reportable asset that was worth more than \$1,000 at the end of the reporting period? of the reporting period? Of the reportable b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of fling?	g the reporting Yes No
C. Did you or your spouse have "earned" income (e.g., salaries, honorarie, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	years? Yes No
ATTACH THE CORR THIS FORM INCLUDES ONLY I	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	INFORMATION - ANSWER BOTH OF THESE	QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" from this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded nt child?	fave you excluded Yes No V
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependen exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, or liabilities of a spouse or dependent child because they meet all three tests for ittee on Ethics.	it all three tests for Yes No V

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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scalade	Equip	livery Van	outy sys	ABC Heige Fund X	Simon & Schuster	Maga Corp Stock	For bank and other cash accounts, the total is every financial institution where there is more than \$1,000 in interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.  For rental and other real property held for investment, provide a complete address of description, e.g., "rental property," and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business the nature of the schildtes, and its geographic location in Block A.  Exclude: Your personal residence, including second homes during the reporting period); and any financial interest in, or income derived from, a federal income during the reporting period; and that is awings relieved investment Fund, please check the "Elf-tox," if you report a privately-traded fund that is asset or income source is that of your spouse (SP) or frome source is that of your spouse (SP) or frome source is that of your spouse (SP) or frome source is that of your spouse (SP) or frome source is that of your spouse (SP) or frome source is that of your spouse (SP) or frome source is the optional column on the far left.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For all IRAs and other relirement plans (such as 401(k) plans) provide the value for each asset held in the account has account the account the second the reporting thresholds.	rovide complete nemes of stocks and mutter hand do not use only ficker symbols).	identify (a) each asset held for investment of production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in funeamed income during the year.	Assets and/or income Sources	BLOCK A
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Use additional sheets if more space is required.

## Name: Lawren Boebert

SCHEDULE A - ASSETS & "UNEARNED INCOME"
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## SCHEDULE C - EARNED INCOME

Name: Lauren Goebest

INCOME LIMITS and PROHIBITED INCOME: Be advised that the outside earned income first and prohibitions on types of income may apply to you after you are on House payroli. The 2018 light or outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, cartain types of income (notably honoraria, director's EXELUDE: Wiltery pay (such as National Guard or Reserve pay), federal retigement pragrams, and benefits received under the Social Security Apri. List the source, type, and amount of earned income from any source (other than the flier's current amployment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any bonesade. List only the source same for other spouse samed income exceeding \$1,000. See examples below. laes, and payments for professional services involving a fiduciary relationship) are totally prohibited for Mambers and septer staff. Examples: trebert Shooters Gride meks house Source (include date of receipt for honoraria) ABC Trade Association, Ballimore, MD (July 15) State of Maryland Civil War Rosindiable (Oct. 2) Onitatio County Board of Education consulting spouse SE Moone SE INCOMO Honorarium Salary Spouse Speech Spouse Salary ncome Typa -ens Current Year Amoun 19901 645-042. ر رچ \$600

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#### SCHEDULE D - LIABILITIES

Name: Lauren Boebest



Report liabilities of over \$10,000 product to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting particular, New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period excesseded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

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7		7503		Example	-		
		G-1		First Bank of Wilmington, DE	Creditor		
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#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
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### SCHEDULE F - AGREEMENTS

Name: Lauren Boebest

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identify the d continuation a employer.	ate, parties to, and general terms of any agreement or arra or deferral of payments by a former or current employer ot	identify the date, perties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
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SCHEDUI	SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE	OF \$5,000 PAID BY ONE SOURCE
Report source customers of government a	Report sources of compensation received by you or your business affiliation for services provided directly by you during the cu customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repea	Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services

					el	/	NOTE NUMBER
				i	Smokehouse 2018 gross 19701 net -155150	Shorters Gill 2018 gross 645042°, net -242,347°	NOTES